## MIAMI-DADE COUNTY BLANKET PURCHASE ORDER

BPO ID: ABCW1600318	PRINT DA	TE: 03/30/2016	PAGE:	01
** ORIGINAL **				
7-12-011		PRIME VEN	PRIME VENDOR SET ASIDE : SUBVENDOR GOAL : 00%	
15800 CRABBS BRAI	NCH WAY, SUITE	210 PRIME VEN	DOR COMMITMENT:	00%
ROCKVILLE	MD 20855			
SHIP TO:				
AS SPECIFIED ON INDIVIDUAL ORDERS PLEASE CONCERT BROWN,		CONCERNING THIS ORD BROWN, MARGARET (305) 375-4914	ER TO:	
ITB ID AVCW1500248	EXPR DATE	DISCOUNT TERMS	CONTRACT	AMOUNT 180.00
BID NUMBER L8485-1/23 ************************************	*****	**************************************	**************************************	*****
SERVICES AS NEEDED	FOR SOFTWARE	MAINTENANCE AND SUPP		
AUTHORIZED DEPT: CALLER ID CAL			ALLOCA LIMIT PHONE	TION: NUMBER
******* TERMS: COSTS OF MANDATORY CONTINUED, NEXT PA		\$113, BY THE INSPECTOR GEN	180.00 ( )	_

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INCORPORATED INTO THIS CONTRACT AS 1/4 OF 1% OF THE CONTRACT PRICE.

THIS CONTRACT IS SUBJECT TO A USER ACCESS FEE UNDER THE COUNTY USER ACCESS PROGRAM (UAP) IN THE AMOUNT OF TWO PERCENT (2%). THE VENDOR PROVIDING GOODS AND SERVICES UNDER THIS CONTRACT SHALL INVOICE THE CONTRACT PRICE AND SHALL ACCEPT AS PAYMENT THEREOF THE CONTRACT PRICE LESS THE 2% UAP AS FULL AND COMPLETE PAYMENT FOR THE GOODS AND/OR SERVICES SPECIFIED ON THE INVOICE. THE COUNTY SHALL RETAIN THE 2% UAP FOR USE BY THE COUNTY TO HELP DEFRAY THE COST OF THE PROCUREMENT PROGRAM. VENDOR PARTICIPATION IN THIS INVOICE REDUCTION PORTION OF THE UAP IS MANDATORY.

THIS IS A BLANKET PURCHASE ORDER COVERING PERIOD FROM 04/01/2016 TO 03/31/2021 DELIVERIES AGAINST THIS PURCHASE ORDER SHALL BE MADE IN QUANTITIES AND TIMES AS REQUESTED BY THE DEPARTMENT DURING SAID PERIOD. INVOICING SHALL BE ON A PER ORDER (DELIVERY) BASIS OR ON A MONTHLY INVOICE BASIS. ALL ITEMS IN ACCORDANCE WITH THE BID PROVISIONS AND SPECIFICATIONS AND THE VENDOR'S QUOTE OR BID. ESTIMATED QUANTITIES AND/OR DOLLARS ARE FOR RECORD PURPOSES ONLY. NO GUARANTEE IS EXPRESSED OR IMPLIED AS TO QUANTITIES AND/OR DOLLARS THAT WILL ACTUALLY BE PURCHASED. THE VENDOR ACCEPTS ALL RISKS ASSOCIATED WITH USING THIS INFORMATION.

\*\* ORIGINAL \*\*

AUTHORIZED SIGNATURE:

\*\*\*\*\*\* LAST PAGE \*\*\*\*\*\*